## CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

# STATEMENT OF ECONOMIC INTERESTS COVER PAGE

n	E Date Intra Filing	[]	- In
Κ.	Received Official Use Only		
	FEB 2 3 2015		

Please type or print in ink

NAME OF FILER				
	(LAST)		(FIRST)	WIPPLEILERK'S OFFICE
Campbell		Thomas	<del></del>	William TrumGHY OF BENICIA
. Office, Agency	, or Court			ਾ ਲ
Agency Name (Do	not use acronyms)		<del></del>	55 A.F.
City of Benicia				무
Division, Board, De	partment, District, if applicable		Your Position	2 0 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
		<del></del>	Council member	<u> </u>
► If filing for multip	ole positions, list below or on an attachme	nt. (Do not use	acronyms)	PH
				3 150
Agency:			Position:	3: HSS
. Jurisdiction a	of Office (Check at least one box)			PH 3:11
☐ State			☐ Judge or Court Commissioner	
Multi-County				· · · · · · · · · · · · · · · · · · ·
City of Benici				
E 5.1, 5.				
. Type of State	ment (Check at least one box)			
Dece	period covered is January 1, 2014, throug mber 31, 2014.	h	Leaving Office: Date Left (Check one)	
	period covered is/ mber 31, 2014.	, through	<ul> <li>The period covered is Jan leaving office.</li> </ul>	uary 1, 2014, through the date of
Assuming Offi	ce: Date assumed/		O The period covered is the date of leaving office.	, through
_	ection year and c	•		
. Schedule Sur				_
Check applicab	ole schedules or "None."	► Total	number of pages including thi	is cover page:
Schedule A-1	- Investments - schedule attached	Ε	Schedule C - Income, Loans, & Bus	siness Positions – schedule attached
Schedule A-2	Investments - schedule attached		Schedule D - Income - Gifts - sche	edule attached
Schedule B - I	Real Property - schedule attached		Schedule E - Income - Gifts - Trav	rel Payments - schedule attached
	<b></b>	-or-		
	None - No r	eportable interes	ts on any schedule	
. Verification	STREET			

#### **SCHEDULE A-1 Investments**

## Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name Tom Capkell

NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE	State Gov.
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	\$2,000 - \$10,000 \( \sigma \)\$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT Stock Other Suns
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
//	
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Soft Duk	d b. Colve
	FAIR MARKET VALUE
FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000	FAIR MARKET VALUE  \$2,000 - \$10,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT (2)
Stock Other(Describe)	Stock Other (Describe)
Partnership O income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	SENERAL DESCRIPTION OF THIS BUSINESS
GENERAL DESCRIPTION OF THIS BUSINESS	Long Dock
	1 *
Compitors	City Gar
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT Sources
(Describe)  Partnership O Income Received of \$0 - \$499	(Describe)  Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
Commenter	

#### **SCHEDULE A-1 Investments**

## Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name Tom Carphy//

NAME OF BUSINESS ENTITY  Cal Educational Fazility	NAME OF BUSINESS ENTITY  Cal State Sept. of Wotel
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
State Go	State GUV
FAIR MARKET VALUE  \$2,000 - \$10,000	FAIB MARKET VALUE  \$2,000 - \$10,000
NATURE OF INVESTMENT Stock Other (Describe)	NATURE OF INVESTMENT Stock Other (Oescribe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
NAME OF BUSINESS ENTITY  LOS Augeles Weste West!  GENERAL DESCRIPTION OF THIS BUSINESS	Seneral Description of this business
c.ty 60/	Local Gov
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$100,000 \$100,000	\$2,000 - \$10,000
NATURE OF INVESTMENT BULL	NATURE OF INVESTMENT
Stock Other (Describe)	Stock Other (Describe)
Partnership O income Received of \$0 - \$499 O income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
Wol must GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Rotal	Ctn Gor
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	\$2,000 - \$10,000
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT Soc S
(Describe)  Partnership O Income Received of \$0 - \$499  Income Received of \$500 or More (Report on Schedule C)	(Describe)  Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/ / 14 / / 14  ACQUIRED DISPOSED	/ / 14 / / 14 ACQUIRED DISPOSED
Commonto	·

#### **SCHEDULE A-1** Investments

## Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name Tom Capty//

NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
Los Augelis Unition School	
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Loral Go	•
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT BANKS	NATURE OF INVESTMENT
Stock Other (Describe)	Stock Other (Describe)
Partnership O Income Received of \$0 - \$499	Partnership O income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,000 \$100,000	\$2,000 - \$10,000
S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other (Describe)	Stock Other (Describe)
Partnership O income Received of \$0 - \$499 O income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
C master transition at the part of particular specific sp	C mostrice independent of actionable by
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
·	
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other	☐ Stock ☐ Other
(Describe) Partnership O Income Received of \$0 - \$499	(Describe)  Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Repart on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
//.14//_14	/ / 14 / / 14
ACQUIRED DISPOSED	ACQUIRED DISPOSED
•	· ·
Comments:	

#### **SCHEDULE A-2**

#### Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name

► 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
164 East H. St.	164 East H. St.
Name	Name
Tom Campbell Orthodontics	Kerry Carney Dentistry
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one  Trust, go to 2  Business Entity, complete the box, then go to 2	Check one  Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Orthodontics	Dentisitry
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  \$0 - \$1,999  \$2,000 - \$10,000  \$10,001 - \$100,000  \$100,001 - \$1,000,000  Over \$1,000,000	FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$0 - \$1,999   \$2,000 - \$10,000
NATURE OF INVESTMENT Partnership Sole Proprietorship Other	NATURE OF INVESTMENT Partnership Sole Proprietorship Other
YOUR BUSINESS POSITION OWNER	YOUR BUSINESS POSITION OWNER
➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>10</u> THE ENTITY/TRUST)
\$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000 \$1,001 - \$10,000	\$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000 \$1,001 - \$10,000
3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)  None or Names tisted below	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)  None or Names listed below
Tom Campbell	Kerry Carney
► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
☐ INVESTMENT ☐ REAL PROPERTY	☐ INVESTMENT ☐ REAL PROPERTY
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity <u>or</u> City or Other Precise Location of Real Property	Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$2,000 - \$10,000     10,001 - \$100,000     100,001 - \$1,000,000     ACQUIRED   DISPOSED   Over \$1,000,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  \$2,000 - \$10,000 \$10,001 - \$1,000,000 \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INTEREST Properly Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership
Leasehold Yrs. remaining Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
Comments	FPPC Form 700 (2014/2015) Sch. A-2

### SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FORM 70	
Name	_

164 East H. St.   CITY
## Benicia, Ca    FAIR MARKET VALUE
FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$2,000 - \$10,000
\$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$1,000,000 Over \$1,000,000  NATURE OF INTEREST Ownership/Deed of Trust  Leasehold Yrs. remaining Other  IF RENTAL PROPERTY, GROSS INCOME RECEIVED \$0 - \$499 \$500 - \$1,000 OVER \$100,000  SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
Ownership/Deed of Trust Easement  Leasehold Other  IF RENTAL PROPERTY, GROSS INCOME RECEIVED  \$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000  \$10,001 - \$100,000 OVER \$100,000  SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
Ownership/Deed of Trust Easement  Leasehold Other  IF RENTAL PROPERTY, GROSS INCOME RECEIVED  \$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000  \$10,001 - \$100,000 OVER \$100,000  SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
Leasehold
Yrs. remaining Other  IF RENTAL PROPERTY, GROSS INCOME RECEIVED  \$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000  \$10,001 - \$100,000 OVER \$100,000  SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$10,000 OVER \$100,000  SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
\$10,001 - \$100,000 OVER \$100,000  SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
interest, list the name of each tenant that is a single source of income of \$10,000 or more.
ding institutions made in the lender's regular course of thout regard to your official status. Personal loans and ss must be disclosed as follows:
NAME OF LENDER*
ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF LENDER
WITCHEN DATE
INTEREST RATE TERM (Months/Years)
_
INTEREST RATE TERM (Months/Years)
_
%
HIGHEST BALANCE DURING REPORTING PERIOD